



THE CITY OF LAKE FOREST
COMMUNITY DEVELOPMENT DEPARTMENT
800 N. FIELD DRIVE, LAKE FOREST, IL 60045
P: (847)810-3502 OR (847)810-3503/3521, F: (847)615-4383
WWW.CITYOFLAKEFOREST.COM

SATELLITE DISH PERMIT REQUIREMENTS

The following is required for a complete permit submittal.

- RESIDENTIAL BUILDING PERMIT APPLICATION.**
- HOMEOWNER'S ASSOCIATION APPROVAL.** Required if your subdivision has an active homeowner's association.
- 2 COPIES OF THE CURRENT, STAMPED PLAT OF SURVEY.** Show the location of all existing structures, property lines, easements and the proposed satellite dish location.



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RESIDENTIAL BUILDING
PERMIT APPLICATION #: _____
DATE: _____

Includes Residential Additions, Alterations, Hardscape Work, Deck, Demolition of Structures, Sheds, Tennis Courts, Sports Courts, Siding, Windows, Interior Drain Tile, Foundation Repairs and Satellite Dishes

PROJECT ADDRESS:	
PROPERTY OWNER:	PHONE:
MAILING ADDRESS (IF DIFFERENT THAN ABOVE):	
PROPERTY OWNER'S EMAIL ADDRESS:	
PROPERTY OWNER'S FAX:	
GENERAL CONTRACTOR:	
MAILING ADDRESS:	
PHONE:	FAX:
EMAIL ADDRESS:	CELL:

DESCRIBE THE PROPOSED PROJECT: _____

\$_____ is the fair market value of the project including all materials, trades, architectural and engineering fees.

As Property Owner, I hereby agree and acknowledge that all work must be done in accordance with Codes adopted by The City of Lake Forest Code and must be consistent with the approved plans. As Owner, I declare that all information submitted in support of the requested permit is accurate. Falsification of any information will result in penalties as provided for in the Code. By signing this form, owner assumes responsibility for the accuracy of the information provided by the contractor.

Signature of Property Owner: _____

Signature of Owner's Authorized Designee (must have Designee Form attached): _____

Printed Name: _____ Contact Phone Number: _____

FOR OFFICE USE ONLY:

BUILDING PERMIT FEE:	\$ _____	PLAN REVISIONS:	\$ _____
PLAN REVIEW FEE:	\$ _____	BUILDING SCALE FEE:	\$ _____
PUBLIC PROPERTY BOND:	\$ _____	STOP WORK ORDER:	\$ _____
PERMIT RENEWAL BOND:	\$ _____	ENGINEERING REVISION:	\$ _____
DRAINAGE WAIVER FEE:	\$ _____	TREE FENCING FEE:	\$ _____
PLAN REVIEW (OVER 2 HRS):	\$ _____	OTHER:	\$ _____
TOTAL FEES: \$ _____			